

SHARED SAVINGS PROGRAM PUBLIC REPORTING TEMPLATE

ACO Name and Location

Sound Physicians Long Term Care Management, LLC

1498 Pacific Ave. Suite 500

Tacoma WA, 98402

ACO Primary Contact

Mike Camacho, President

817-965-8030

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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
DAIYA HEALTHCARE PLLC	No
POST ACUTE MEDICAL PLLC	No
HOSPITALIST MEDICINE PHYSICIANS OF FLORIDA - JACKSONVILLE II LLC	No
HOSPITALIST MEDICINE PHYSICIANS OF MISSISSIPPI-TCG, INC.	No
HOSPITALIST MEDICINE PHYSICIANS OF ILLINOIS - TCS	No
COGENT HEALTHCARE OF JACKSONVILLE, LLC	No
SOUND PHYSICIANS OF INDIANA, LLC	No
PROACTIVE CLINICAL PARTNERS	No
HOSPITALIST MEDICINE PHYSICIANS OF WASHINGTON TACOMA PLLC	No
HOSPITALIST MEDICINE PHYSICIANS OF MICHIGAN - SAGINAW PLLC	No
SUMMIT MEDICAL CONSULTANTS PLLC	No
CHARTER LTC LLC	No
OAK MEDICAL SC	No
SHC MEDICAL PARTNERS OF MARYLAND, LLC	No
SHC MEDICAL PARTNERS OF NORTH CAROLINA LLC	No
CORE CLINICALS LLC	No
ADVANCED SENIOR CARE OF MISSOURI INC	No
MID AMERICA SENIOR MANAGEMENT ACO LLC	No
CIRCLE MEDICAL TEAM LLC	No
RFVW HEALTHCARE, PC	No
PROACTIVE CLINICAL PARTNERS - ACO	No
EXTENSIVISTS OF TEXAS PLLC	No
BLISS SPECIALTY HEALTHCARE GROUP	No
TODD FARRER, M.D., INC.	No
ATLAS MEDICAL ACO LLC	No
RENUVEN ACO PLLC	No

WESTVIEW DELIVERY SYSTEM INC	No
AT HOME PRIMARY CARE INC	No

ACO Governing Body:

Member First Name	Member Last Name	Member Title/Position	Member's Voting Power (Expressed as a percentage)	Membership Type	ACO Participant Legal Business Name, if applicable
Pam	Stahl	Chair	12.50%	ACO Member Representative	COGENT HEALTHCARE OF NEW JERSEY, P.C. COGENT MEDICAL CARE, P.C. ENDION MEDICAL HEALTHCARE, P.C. INPATIENT SERVICES, PC
Mihir	Patel, M.D.	Member	12.50%	ACO Participant Representative	HOSPITALIST MEDICINE PHYSICIANS OF VIRGINIA, LLC
Brian	Carpenter, M.D.	Member	12.50%	ACO Participant Representative	COGENT HEALTHCARE OF ARIZONA, P.C. COGENT HEALTHCARE OF KENTUCKY, P.S.C.
Thomas	Kim, M.D.	Member	12.50%	ACO Participant Representative	HOSPITALIST MEDICINE PHYSICIANS OF PENNSYLVANIA PC
Michael	Camacho	Member	12.50%	ACO Participant Representative	SOUND PHYSICIANS OF IDAHO, PLLC SOUTH SOUND INPATIENT PHYSICIANS, PLLC
Rajendra	Kadari, M.D.	Member	12.50%	ACO Participant Representative	SUMMIT MEDICAL CONSULTANTS PLLC
Robin	Bhasin, M.D.	Member	12.50%	ACO Participant Representative	POST ACUTE MEDICAL PLLC
James	Foy	Member	12.50%	Medicare Beneficiary Representative	NA

Key ACO Clinical and Administrative Leadership:

ACO Executive: Mike Camacho

Medical Director: Tom Kim, MD

Compliance Officer: Michelle O'Neill

Quality Assurance/Improvement Officer: Sandeep Yadavalli, M.D. Chair

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Quality	Sandeep Yadavalli, M.D. Chair
Compliance	Brian Carpenter, M.D. Chair
Finance	Michael Camacho, Chair

Types of ACO Participants, or Combinations of Participants, That Formed the ACO:

- ACO Professionals in a group practice arrangement

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Fourth Agreement Period
 - Performance Year 2026, \$ N/A
- Third Agreement Period
 - Performance Year 2025, \$ N/A
- Second Agreement Period
 - Performance Year **2024**, \$ **83,770,701.11**
- First Agreement Period
 - Performance Year **2023**, \$**16,877,543**

Shared Savings Distribution:

- Fourth Agreement Period
 - Performance Year **2026**
 - Proportion invested in infrastructure: N/A%
 - Proportion invested in redesigned care processes/resources: N/A%
 - Proportion of distribution to ACO participants: N/A%
- Third Agreement Period
 - Performance Year 2025
 - Proportion invested in infrastructure: N/A%
 - Proportion invested in redesigned care processes/resources: N/A%
 - Proportion of distribution to ACO participants: N/A%
- Second Agreement Period
 - Performance Year 2024
 - Proportion invested in infrastructure: **20%**
 - Proportion invested in redesigned care processes/resources: **25%**
 - Proportion of distribution to ACO participants: **55%** (35% Providers + 20% Facilities)
- First Agreement Period

- o Performance Year **2023**
 - Proportion invested in infrastructure: **25%**
 - Proportion invested in redesigned care processes/resources: **25%**
 - Proportion of distribution to ACO participants: **50%** (25% Providers + 25% Facilities)

Quality Performance Results

2024 Quality Performance Results:

Quality performance results are based on the **MIPS CQM** collection type.

Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
Quality ID#: 001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) [1]	MIPS CQM	26.54	23.88
Quality ID#: 134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	MIPS CQM	34.16	53.18
Quality ID#: 236	Controlling High Blood Pressure	MIPS CQM	74.44	72.43
Quality ID#: 321	CAHPS for MIPS [2]	CAHPS	4.31	6.67
Measure # 479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible Clinician Groups [1]	Administrative Claims	0.1458	0.1517
Measure # 484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions [1]	Administrative Claims	44.26	37.00

For previous years' Financial and Quality Performance Results, please visit: Data.cms.gov

Payment Rule Waivers

- Skilled Nursing Facility (SNF) 3-Day Rule Waiver: **NO**
- Payment for Telehealth Services: **YES**
 - o Our ACO clinicians provide telehealth services using the flexibilities under 42 CFR § 425.612(f) and 42 CFR § 425.613.

Fraud and Abuse Waivers

- **ACO Participation Waiver:**

The following information describes each arrangement for which our ACO seeks protection under the *ACO Participation Waiver*, including any material amendment or modification to a disclosed arrangement.

For each arrangement, provide the following information:

Medicare Shared Savings Program Required Public Disclosure for Waivers of the Fraud and Abuse Laws

Sound Physicians Long Term Care Management, LLC operates an accountable care organization ("ACO") that has entered into a Participation Agreement with the Centers for Medicare and Medicaid Services ("CMS") effective January 1, 2023, through which the ACO participates in the Medicare Shared Savings Program ("MSSP"), created under Section 3022 of the Patient Protection and Affordable Care Act (Pub. Law No. 111-148, as amended by Pub. Law No. 111-152 (2010)).

The Secretary of the U.S. Department of Health and Human Services, through a rule released by CMS and the Office of Inspector General, has provided two (2) waivers of federal fraud and abuse laws in connection with the operation of the MSSP during the three-year Participation Agreement term (80 Fed. Reg. 66726 (Oct. 29, 2015)) which require public disclosure of the underlying arrangement for which waiver protection is sought: (1) the ACO Pre-Participation Waiver; and (2) the ACO Participation Waiver.

These waivers are applicable only when, among other things, the governing body of the ACO has reviewed and made a bona fide determination that an arrangement is reasonably related to the purposes of the MSSP. The ACO governing body can make this determination for a wide range of arrangements, including, without limitation, start-up arrangements and ACO activities, as well as performance-based compensation dependent upon achieving quality thresholds or efficiency measures evaluated under the MSSP. The purposes of the MSSP consist of promoting accountability for the quality, cost and overall care through initiatives, including those described at 80 Fed. Reg. 66730-66731 for Medicare beneficiaries assigned to the ACO under the applicable regulations at 42 C.F.R. Part E.

Capitalized terms used herein, but not otherwise defined, shall have the meanings ascribed to such terms in the regulations governing the MSSP, located at 42 C.F.R. Part 425 (the "MSSP Regulations").

DISCLOSED ARRANGEMENTS

The ACO Board of Managers (the “ACO Board”) has duly authorized the arrangements below and made a bona fide determination that each arrangement is reasonably related to the purposes of the MSSP because the arrangements will promote accountability for the quality, cost and overall care for Medicare beneficiaries assigned to ACO. The descriptions of relevant arrangements are set forth below for the purpose of the ACO availing itself of the protections afforded under the waivers specified for each arrangement.

Arrangement #1 (Telemedicine): On December 15th, 2022, the ACO Board approved an arrangement whereby the ACO, through a contractual relationship with Sound Physicians Telemedicine, Inc. beginning January 1, 2023, provides telemedicine services to patients/ residents of ACO Participants, ACO Providers/Suppliers, or ACO Other Entities. The arrangement enables the ACO to increase physician access, improve clinical quality, offer better coordination of care and improve overall costs of patients/residents of skilled nursing facilities through the provision of telemedicine physician services.

Arrangement #2 (EHR Subsidy): On March 15th, 2024, the ACO Board approved a subsidy program for the cost of electronic health record (EHR) systems that have specific technical and performance capabilities to physician and advanced practice provider participants in the ACO who meet certain qualifications in order to position the ACO and its participants to engage in reporting aggregate Clinical Quality Measures (eCQMs) and Merit-based Incentive Payment System ("MIPS") clinical quality measures (CQMs) for the 2025 performance year.

Future arrangements will be added to this list.